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**FACSIMILE TRANSMISSION COVER SHEET**

Date: December 21, 2005

To: United States Patent and Trademark Office  
Examiner: Tran, Khanh C.; Art Unit: 2631

Fax: (571) 273-8300

Re: Application Serial No.: 09/910,289  
Filing Date: 7/19/2001; First-Named Inventor: Petranovich  
Attorney Docket No.: 01CON213P

From: Farjami & Farjami LLP

Number of pages including the cover sheet: 20

Message:

Enclosed please find the Response to Non-Final Office Action dated October 3, 2005.

Also, enclosed please find the Declaration under 37 C.F.R. §1.131 and the Innovation Disclosure.

Thank you.

The documents accompanying this facsimile contain PRIVILEGED AND CONFIDENTIAL information intended only for use of the individual or entity named above. If you are not the intended recipient, disclosure, copying, distribution or use of the contents of this facsimile information is prohibited. If you have received this facsimile in error, please immediately notify us by telephone and return the original facsimile to us at the above address via U.S. Postal Service. We will reimburse you for all expenses incurred.

Attorney Docket No.: 01CON213P

**AMENDMENT COVER SHEET**IN RE APPLICATION OF: Petranovich, et al.SERIAL NO.: 09/910,289 FILED: 7/19/2001FOR: Multiple Symbol Rate Burst Equalizer TrainingHONORABLE COMMISSIONER FOR PATENTS  
P.O. Box 1450, Alexandria, VA 22313-1450

Sir/Madam:

Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.

No additional fee is required.  
 The fee has been calculated as shown below:

EXTENSION FEE	RATE Non-Small Entity	RATE Small-Entity	FEE
FIRST MONTH AFTER TIME PERIOD SET	120.00	60.00	\$
SECOND MONTH AFTER TIME PERIOD SET	450.00	225.00	\$
THIRD MONTH AFTER TIME PERIOD SET	1,020.00	510.00	\$
FOURTH MONTH AFTER TIME PERIOD SET	1,590.00	795.00	\$

TOTAL EXTENSION FEE \$ 0.00  
 FEE FOR EXTRA CLAIMS added by Amendment in this response:

	Column 1	Column 2	Column 3			
	Number of Claims after Amendment	Number Previously Paid for	Number of Extra Claims	RATE Non-Small Entity	RATE Small Entity	FEE
TOTAL CLAIMS	20	MINUS ***23	* = 0	x 50	x 25	\$
INDEPENDENT	4	MINUS ***4	* = 0	x 200	x 100	\$
First presentation of multiple dependent claim				+ 360	+ 180	\$

TOTAL FEE FOR EXTRA CLAIMS \$ 0.00

\* If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.  
\*\* If the number of Total Claims previously paid for is less than 20, write "20" in this space.  
\*\*\* If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

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Attorney Docket No.: 01CON213P

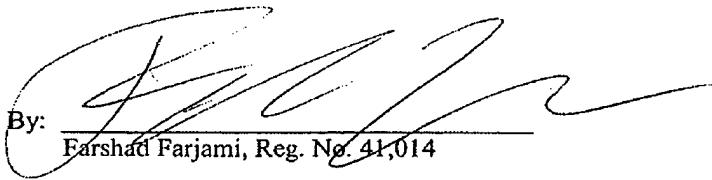
Enclosed is the total fee of \$ \_\_\_\_\_ (Payment by Credit Card, Form PTO-2038 Enclosed).

Please charge Deposit Account No. 50-0731 in the amount of \$ \_\_\_\_\_.

The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication, or credit any overpayment to Deposit Account No. 50-0731. A duplicate copy of this sheet is enclosed.

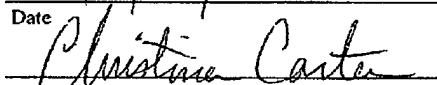
Date: 12/21/05

By:

  
Farshad Farjami, Reg. No. 41,014CERTIFICATE OF FACSIMILE TRANSMISSION

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Date

12/21/05  


Signature

Christina Carter  
Name of Person Performing Facsimile Transmission

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First presentation of multiple dependent claim

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Attorney Docket No.: 01CON213P

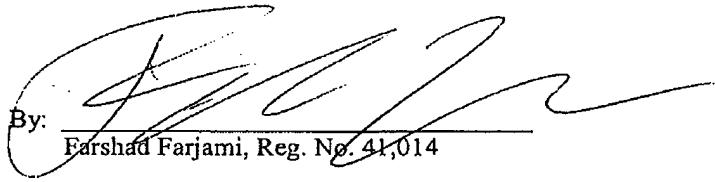
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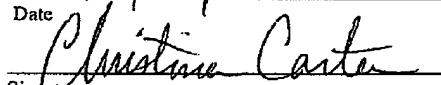
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Application Serial No.: 09/910,289  
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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In re Application of: **JIM E. PETRANOVICH**

Art Unit: 2631

**DEC 21 2005**

Serial No.: **09/910,289**

Examiner: Tran, Khanh C.

Filed: **July 19, 2001**

For: **MULTIPLE SYMBOL RATE BURST  
EQUALIZER TRAINING**

**RESPONSE TO NON-FINAL OFFICE ACTION**

Honorable Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir/Madam:

This is in response to the *Non-Final* Office Action, dated October 3, 2005, in the above-referenced patent application. Please consider the following remarks.